## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent advance orders and polification of maintenance fees will be mailed to the current correspondence address as

indicated unless correct maintenance fee notifica	ed below or directed oth	nerwise in Block 1, by (a	a) specifying a new cor	respondence address;	and/or (b) indicating a sep	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
36528	7590 02/05	/2008	n:		•		
STIENNON & STIENNON				Cer hereby certify that th	tificate of Mailing or Trans is Fee(s) Transmittal is bein	smission or deposited with the United	
612 W. MAIN ST., SUITE 201				tates Postal Service v	vith sufficient postage for fir	ig deposited with the United rst class mail in an envelope above, or being facsimile date indicated below.	
P.O. BOX 1667				ansmitted to the USP	TO (571) 273-2885, on the	date indicated below.	
MADISON, WI	53701-1667		Г			(Depositor's name)	
			F			(Signature)	
			_			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	DR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/598,664	10/27/2006		Pekka Linnonmaa		TAMPPAT-21	8661	
TITUE OF INVENTION	: METHOD AND APPA	ARATUS FOR PRODUC	ING CALENDERED PA	APER			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	05/05/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	•			
NGUYEN, JIMMY T 3725		3725	100-038000	_	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys  1. Stiennon & Stiennon				
· ′	ondence address (or Cha B/122) attached.	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3				
	•						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)	<u>-</u>		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Metso Paper, Inc. Helsinki, FI							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 😾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s)	are submitted:	41	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)				
Issue Fee			A check is enclosed.				
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - #	f of Copies		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2663 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)  \[ \begin{align*}							
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	uired) will not be accepted	d from anyone other than	the applicant; a regi	stered attorney or agent; or t	he assignee or other party in	
Authorized Signature	0				il 17, 2008		
		G Stiennor		Registration N	io. 34934	_	
Typed or printed name <u>Patrick J.G. Stiennon</u> Registration No. <u>34934</u> This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	iality is governed by 35 application form to the ons for reducing this bur irginia 22313-1450. DO 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (	1.14. This collection is e depending upon the inde e Chief Information Offi COMPLETED FORMS	stimated to take 12 r ividual case. Any co cer, U.S. Patent and TO THIS ADDRESS	ninutes to complete, including mments on the amount of ting trademark Office, U.S. Dept. SEND TO: Commissioner	ng gathering, preparing, and me you require to complete lartment of Commerce, P.O. for Patents, P.O. Box 1450,	
		persons are required to res	spond to a collection of i	nformation unless it o	displays a valid OMB contro	l number.	